United Nations E/ICEF/2000/P/L.11

# Economic and Social Council

Distr.: Limited
5 November 1999

Original: English

**United Nations Children's Fund**
Executive Board
**First regular session 2000**
31 January-4 February 2000
Item 8 of the provisional agenda*

*For information*

## Country note**

## Indonesia

*Summary*

The Executive Director presents the country note for Indonesia for a programme of cooperation for the period 2001 to 2005.

## The situation of children and women

1. In the two decades preceding the recent economic crisis, Indonesia made widespread progress in child survival and development. According to the Central Bureau of Statistics, between 1976 and 1996, poverty fell from 40 to 11 per cent and annual per capita income increased from $70 to $1,080. But since mid-1997, economic and political crises have severely affected Indonesian families, and poverty has increased to 24 per cent, afflicting 50 million of the country's 210 million people. Efforts to achieve the World Summit for Children goals have shown striking progress, but there are still areas that need renewed commitment. For example, although the under-five mortality rate dropped from 103 to 71 per 1,000 live births between 1986 and 1996, inter-provincial disparities remain very wide, ranging from 30 in Yogyakarta province to 149 in West Nusa Tenggara.

2. In 1997, only 55 per cent of infants had received a full course of immunization and 54 per cent of mothers had received two doses of tetanus toxoid. Diarrhoea prevalence among young children has declined marginally in recent years, and acute respiratory infections account for 35 per cent of under-five deaths. With over 500,000 new cases reported each year in the general population, tuberculosis is another major concern. In addition, while the national prevalence of HIV/AIDS is still very low, in several provinces and metropolitan Jakarta, it is estimated that 2 to 3 per cent of commercial sex workers are now HIV positive.

3. Maternal mortality is still unacceptably high, with an estimated 334 women dying in childbirth for every 100,000 live births. The main underlying causes are poorly trained health personnel, a lack of transport, late referral and poor

* E/ICEF/2000/2.

** An addendum to the present report containing the final country programme recommendation will be submitted to the Executive Board for approval at its second regular session of 2000.

99-33384 (E) 061299

emergency care. Overall, about one half of all births are attended by trained personnel, although this also varies greatly among provinces. The figure for West Nusa Tenggara, for example, is only 24 per cent.

4. The nutritional status of children and women continues to be a pressing concern. By the age of five years, 30 per cent of all children are under weight. According to a survey of 15 provinces, blindness due to vitamin A deficiency declined substantially between 1978 and 1992, from 1.3 to 0.33 per cent, but there is some evidence that this trend has been reversed by the economic crisis. Fifty per cent of all women and children aged 5 to 14 years suffer from iron deficiency anaemia. Low birth weight (below 2,500 grams) is estimated at 10 per cent, but this estimate is probably too low given the large number of early marriages and poor maternal nutrition.

5. On the positive side, the incidence of goitre among schoolchildren dropped from 28 to 10 per cent between 1987 and 1998, and 65 per cent of households are now consuming adequately iodized salt. Access to clean water and sanitation increased substantially in recent years, reaching 76 and 65 per cent, respectively, of all households by 1998. However, there is a 25 per cent gap between urban and rural coverage, and in four provinces, less than one half of all households have adequate sanitation.

6. Over the past two decades educational attainment has improved greatly, and by 1998, adult literacy had reached 93 per cent for men and 85 per cent for women. Net primary school enrolment is over 90 per cent, and 52 per cent of children are enrolled in junior secondary school. However, 6.4 million children in the 7- to 15-year-old age group do not attend school, and access to education is a major problem for many, especially girls from poor households.

7. Difficult economic conditions are increasingly forcing children into exploitative and hazardous work, particularly in urban areas. An estimated 30 per cent of commercial sex workers are under 18 years of age. Unstable home environments, aggravated by the recent crisis, are also pushing many children onto the street. Tackling these problems is difficult, in part because child abuse lacks a legal definition, an established reporting system and consistent enforcement. No official figures are available on overall coverage of birth registration or on regional or ethnic disparities.

## Lessons learned from past cooperation

8. The financial and economic crisis that struck in mid-1997 prompted a realignment of the UNICEF country programme at the mid-term review in 1998 (see E/ICEF/1999/P/L.4). Three programmes and 14 projects were distilled into four crisis response programmes. This new configuration sought to address the specific effects of the emergency while remaining consistent with the goals and principles laid out in the master plan of operations. The next country programme will draw upon the lessons from this crisis response experience. Among the most important general lessons are: (a) that a limited set of effective strategies and programme components is key to successful implementation across a wide range of substantive areas; and (b) that local institutions and traditions of mutual self-help at family and community levels are particularly important in Indonesia, and need to be supported, strengthened and focused to respond to the rights and needs of children and women.

9. The current country programme allocated substantial resources to local capacity-building initiatives, but with inadequate substantive focus, these efforts had limited impact on the problems of children and women. The political environment also hindered the translation of policies for decentralization, community participation and service integration into effective action.

10. The programme objectives proved difficult to measure in some areas and did not always correspond with activities actually implemented. Pilot testing of proposed activities and more systematic monitoring would probably have improved effectiveness. While financial utilization was sustained at over 80 per cent, there was a tendency towards large disbursements late in the financial year and a correspondingly high level of delinquency with regard to cash assistance to Government. The cumulative effect was to shorten the time available for project implementation.

11. Several components of the current country programme demonstrated the comparative advantage of UNICEF in large-scale social mobilization campaigns such as National Immunization Days and the back-to-school campaign. Substantial opportunities exist for productive partnerships in such mobilization efforts. National and provincial child protection bodies, for example, can become a major channel for pilot initiatives, and there is considerable untapped potential for working with local non-governmental organizations (NGOs) and religious groups to address child protection and gender issues.

12. The UNICEF advocacy relationship with a broad range of leadership in Indonesia's civil society, going beyond the governmental hierarchy, proved very helpful in ensuring that the needs and rights of children remained high on the agenda, even as the political landscape in Indonesia – and most recently in East Timor – changed dramatically.

## Proposed country programme strategy

13. The overarching goal of the Government of Indonesia-UNICEF programme of cooperation for 2001-2005 is to support the realization of the rights of children and women, and to maximize their potential for development. Strategies will focus on families and communities as the primary guardians of their members, and will strive to equip and empower them to make informed decisions in areas such as preventive and curative health, education, psycho-social stimulation, and protection from abuse and exploitation. While families and communities should be in the forefront, vigilance at these levels must be backstopped and reinforced by available and accessible services when specialized assistance is needed. Protection for those in especially vulnerable situations will require special legal, policy and programme interventions.

14. Improving the status of women requires recognition of their multiple roles as citizens, mothers, caregivers, educators, community leaders and economically productive members of society. Their special needs related to pregnancy, childbirth and breastfeeding must also be addressed.

15. The new country programme will take full advantage of new laws on local governance and fiscal decentralization, which open the way for significant expansion of popular participation in agenda setting and resource allocation decisions. Partnerships with community-based organizations, religious groups and the private sector will be pursued to raise the awareness of families and communities about their rights and help them to make their voices heard.

16. All of the above approaches will be reinforced by advocacy and mobilization within the more open, democratic and decentralized structures that are emerging in Indonesia. National and provincial legislatures and local government bodies will be among the key institutional actors providing policy and administrative support. The mass media and civil society organizations will be mobilized to link the recognized rights and needs of children and women with the allocation of public resources for essential services.

17. Five programmes have been identified for Government of Indonesia-UNICEF cooperation in 2001-2005. In terms of policy development and advocacy, all programmes will seek to have nationwide impact, while certain specific programme interventions will be implemented in 40 districts and municipalities of eight provinces. UNICEF assistance will help these selected areas to identify and address their particular priority needs. The most promising of these efforts will provide models for implementation on a wider scale.

18. The *maternal and early childhood care* programme will promote effective home-based care for young children and women, and the prevention and early treatment of illness. It will support home visits by front-line workers and strengthen community-based activities that foster proper caring practices and behaviours. The programme will also seek to improve the quality of care provided by service facilities, emphasizing referral and support links between village residents and subdistrict health centres.

19. The *basic education for all* programme will focus on the structural problems that block access, contribute to high drop-out rates and negatively affect the quality of the educational system. The programme will emphasize improving the readiness of children for formal education, strengthening school autonomy and local management of educational resources, and promoting parent-teacher associations as active participants in the educational process. The programme will also reach out to women and out-of-school youth, offering activities that provide life skills and functional literacy to those outside the formal system.

20. The programme for *children in need of special protection* will support social and legal protection against all forms of discrimination, violence, exploitation, abuse and neglect of children in both urban and rural areas, with particular attention to the girl child. Areas to be addressed will include commercial sexual exploitation, the sale and trafficking of children, child abuse, street children, birth registration and juvenile justice. The programme will help to strengthen the capacity of national and provincial child protection bodies and will support legal reform and improved enforcement of existing laws.

21. In the *policy development and advocacy* programme, UNICEF assistance will promote the adoption of policies, laws and programmes that place the rights of children and women high on government and civil society agendas. This programme will support policy development at both national and subnational levels through expanded partnerships, data-driven advocacy and social mobilization involving Parliament, political parties, local government bodies, civil society organizations and NGOs. In addition, it will monitor

country programme achievements against stated objectives, support evaluations for mid-term corrections and track progress towards achievement of the World Summit goals.

22. The vast Indonesian archipelago is prone to a variety of natural disasters, including earthquakes, volcanic eruptions and floods, which have a devastating impact on normal life and trigger longer-term negative consequences for affected populations. Similarly, as recent events have shown, economic disruption and social unrest can pose serious threats to the lives and well- being of children and women. The *emergency support* programme will address the priority needs of children and women caught up in emergency situations. Special attention will be given to the rapid response to the immediate and short-term needs of children and women with pre-planned inputs such as fortified food, water and sanitation facilities, medical and educational supplies, and interventions to deal with psycho-social trauma.

## Estimated programme budget

**Estimated programme cooperation, 2001-2005**[a]
(In thousands of United States dollars)

| | *Regular resources* | *Other resources* | *Total* |
|---|---|---|---|
| Maternal and early child care | 8 500 | 45 000 | 53 500 |
| Basic education for all | 4 250 | 14 000 | 18 250 |
| Children in need of special protection | 3 000 | 16 000 | 19 000 |
| Policy development and advocacy | 5 900 | 8 000 | 13 900 |
| Emergency support | 1 250 | - | 1 250 |
| Cross-sectoral costs | 2 500 | - | 2 500 |
| **Total** | **25 400** | **83 000** | **108 400** |

[a] These are indicative figures only which are subject to change once aggregate financial data are finalized.